

MINIMUM STANDARDS FOR ALL HEALTH CARE FACILITIES SURVEY TOOL

FACILITY: _____ ADDRESS: _____ DATE/S: _____

ADMINISTRATOR: _____ TELEPHONE # _____ TASK/WORK ORDER #: _____

SURVEYOR/S: _____ E-Mail/Web: _____ License #: _____

RULE	GUIDELINES	YES	NO	COMMENTS
<u>37.106.311 MINIMUM STANDARDS FOR ALL HEALTH CARE FACILITIES: FOOD SERVICE ESTABLISHMENTS</u> (1) A health care facility which serves food or beverage to patients or residents shall comply with the food service establishment act, Title 50, chapter 50, MCA, and food service establishments rules, ARM Title 37, chapter 110, subchapter 2.	Obtain copy of most recent local Sanitarian report, if available. Use Food Service Establishment Survey tool & cite findings as indicated. Conduct complete survey if local Sanitarian not available or report > 12 months old.			
<u>37.106.313 MINIMUM STANDARDS FOR ALL HEALTH CARE FACILITIES: COMMUNICABLE DISEASE CONTROL</u> (1) All health care facilities shall develop and implement an infection prevention and control program. At minimum the facility shall develop, implement, and review, at least annually, written policies and procedures regarding infection prevention and control which must include, but not be limited to, procedures to identify high risk individuals and what methods are used to protect, contain or minimize the risk to patients, residents, staff and visitors. (2) The administrator, or designee, shall be responsible for the direction, provision, and quality of infection prevention and control services.	Review: facility policies and procedures for Infection Control and evidence of annual review. Personnel files for facility employee requirements/documentation per facility P & P. Interview staff for understanding of procedures as indicated. Observe facility for evidence of infection control policy implementation: food service practices, hand washing signs, hand washing supplies in all sink/bathroom areas.			
<u>37.106.314 MINIMUM STANDARDS FOR ALL</u>	Observe Medical Records			

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<p><u>HEALTH CARE FACILITIES:</u> <u>MEDICAL RECORDS</u> (1) A health care facility shall initiate and maintain by storing in a safe manner and in a safe location a medical record for each patient and resident. (2) A health care facility, excluding a hospital, shall retain a patient's or resident's medical records for no less than five years following the date of the patient's or resident's discharge or death. (3) A medical record may be microfilmed or preserved via any other electronic medium that yields a true copy of the record if the health care facility has the equipment to reproduce records on the premises. (4) A signature of a physician may not be stamped on a medical record unless there is a statement in the facility administrator's or manager's file signed by the physician stating that the physician is responsible for the content of any document signed with his rubber stamp.</p>	<p>storage system and/or office.</p> <p>Does the facility store records electronically and how (microfile/scanning)?</p> <p>If so, is the copy true?</p> <p>How is the documentation secured?</p> <p>Interview medical records staff, request documentation for required physician signature, if applicable.</p>			
<p><u>37.106.320 MINIMUM STANDARDS FOR ALL HEALTH CARE FACILITIES:</u> <u>PHYSICAL PLANT AND EQUIPMENT MAINTENANCE</u> (1) Each facility shall have a written maintenance program describing the procedures that must be utilized by maintenance personnel to keep the building and equipment in repair and free from hazards. (2) A health care facility shall provide housekeeping services on a daily basis. (3) All electrical, mechanical, plumbing, fire protection, heating, and sewage disposal systems must be kept in operational condition. (4) Floors must be covered with an easily cleanable</p>	<p>Interview maintenance personnel; review P & P as indicated. Obtain copy of sprinkler system and smoke alarm and call light system testing. Has there been a recent Fire Marshal or Fire Life Safety survey? Obtain copy for facility file, as indicated.</p> <p>Observe building & equipment for any repair or hazards.</p> <p>Obtain/Interview housekeeping staff schedule- does it meet the facility's</p>			

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<p>covering; e.g., resilient flooring or ceramic tile. This covering must be cleaned daily.</p> <p>(5) Carpets are prohibited in bathrooms, kitchens, laundries, or janitor closets.</p> <p>(6) Walls and ceilings must be kept in good repair and be of a finish that can be easily cleaned.</p> <p>(7) Every facility must be kept clean and free of odors. Deodorants may not be used for odor control in lieu of proper ventilation.</p> <p>(8) The temperature of hot water supplied to hand washing and bathing facilities must not exceed 120°F.</p>	<p>does it meet the facility's needs?</p> <p>Observe facility throughout survey for (4) through (7).</p> <p>Measure the hand washing & bathing facility water temperatures.</p>			
<p><u>37.106.321 MINIMUM STANDARDS FOR ALL HEALTH CARE FACILITIES:</u></p> <p><u>ENVIRONMENTAL CONTROL</u> (1) A health care facility must be constructed and maintained so as to prevent entrance and harborage of rats, mice, insects, flies, or other vermin.</p> <p>(2) Hand cleansing soap or detergent and individual towels must be available at each lavatory in the facility. A waste receptacle must be located near each lavatory.</p> <p>(3) A health care facility shall develop and follow a written infection control surveillance program describing the procedures that must be utilized by the entire facility staff in the identification, investigation, and mitigation of infections acquired in the facility.</p> <p>(4) Cleaners used in cleaning bathtubs, showers, lavatories, urinals, toilet bowls, toilet seats, and floors must contain fungicides or germicides with current EPA registration for that purpose.</p> <p>(5) Cleaning devices used for lavatories, toilet bowls, showers, or bathtubs may not be used for other purposes. Those utensils used to clean toilets or urinals must not be allowed to contact other cleaning</p>	<p>Observe for any repair needs or construction that may allow the entrance of vermin.</p> <p>Observe all lavatories for required supplies.</p> <p>In addition to the criteria of 37.106.313, request facility QA for infection control. Are there any problems? How many Nosocomial infections has the facility had in the past year?</p> <p>Observe housekeeping cart/supplies-ask staff what products are being used to clean these areas, does this product have an EPA registration? Does the product adequately address the infection control needs of the facility?</p>			

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<p>urinals must not be allowed to contact other cleaning devices.</p> <p>(6) Dry dust mops and dry dust cloths may not be used for dusting or other cleaning purposes. Treated mops, wet mops, treated cloths, moist cloths or other means approved by the department which will not spread soil from one place to another must be used for dusting and cleaning and must be stored separately from the cleaning devices described in (5) above.</p> <p>(7) A minimum of 10 foot-candles of light must be available in all rooms and hallways, with the following exceptions:</p> <p>(a) all reading lamps must have a capacity to provide a minimum of 30 foot-candles of light;</p> <p>(b) all toilet and bathing areas must be provided with a minimum of 30 foot-candles of light;</p> <p>(c) general lighting in food preparation areas must be a minimum of 50 foot-candles of light;</p> <p>(d) hallways must be illuminated at all times by at least a minimum of five foot-candles of light at the floor.</p>	<p>Observe utility rooms/mop rooms-how are the utensils stored and how often are they cleaned-is there any contact with other cleaning devices?</p> <p>Is there any indication that dusting is spreading soil from one place to another? Are the dusting and cleaning devices stored separately from items used in (5)?</p> <p>Observe quality/amount of lighting-measure if indicated.</p>			
<p><u>37.106.322 MINIMUM STANDARDS FOR ALL HEALTH CARE FACILITIES:</u></p> <p>DISASTER PLAN (1) A health care facility shall develop a disaster plan in conjunction with other emergency services in the community which must include a procedure that will be followed in the event of a natural or man-caused disaster.</p> <p>(2) A health care facility shall conduct a drill of such procedure at least once a year. After a drill, a health care facility shall prepare and retain on file a written report including, but not limited to, the following:</p>	<p>Request copy of the facility's community disaster plan.</p> <p>When was the disaster drill conducted? Does the report contain (a) through (f)?</p> <p>* 9/11 programs address this</p>			

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(a) date and time of the drill; (b) the names of staff involved in the drill; (c) the names of other health care facilities, if any, which were involved in the drill; (d) the names of other persons involved in the drill; (e) a description of all phases of the drill procedure and suggestions for improvement; and (f) the signature of the person conducting the drill.	requirement			
<u>37.106.330 MINIMUM STANDARDS FOR ALL HEALTH CARE FACILITIES:</u> <u>WRITTEN POLICY AND PROCEDURE</u> (1) A written policy and procedure for all services provided in a health care facility must be available to and followed by all personnel.	Ask for the location or observe the location of the P & P. Facility may have P & P available on CD-ROM or local network-ask for demonstration of access-review as indicated throughout survey.			
<u>37.106.331 MINIMUM STANDARDS FOR ALL HEALTH CARE FACILITIES:</u> <u>LAUNDRY AND BEDDING</u> (1) If a health care facility processes its laundry on the facility site, it must: (a) set aside and utilize a room solely for laundry purposes; (b) equip the laundry room with a mechanical washer and dryer (or additional machines if necessary to handle the laundry load), handwashing facilities, mechanical ventilation to the outside, a fresh air supply, and a hot water supply system which supplies the washer with water of at least 160°F (71°C) during each use; (c) sort and store soiled laundry in an area separate from that used to sort and store clean laundry; (d) provide well maintained carts or other containers impervious to moisture to transport laundry, keeping	Is the room used for laundry solely used for this purpose? Are there enough machines for the workload? Review staffing schedule. Is there adequate hand washing facilities? Is the mechanical ventilation to the outside? Is there a fresh air supply? What is the water temperature? Observe: is the soiled laundry and clean in separate areas?			

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<p>those used for soiled laundry separate from those used for clean laundry;</p> <p>(e) dry all bed linen, towels, and washcloths in the dryer, or, in the case of bed linen, by use of a flatwork ironer;</p> <p>(f) protect clean laundry from contamination;</p> <p>(g) ensure that facility staff handling laundry cover their clothes while working with soiled laundry, use separate clean covering for their clothes while handling clean laundry, and wash their hands both after working with soiled laundry and before they handle clean laundry.</p> <p>(2) If laundry is cleaned off site, the health care facility must utilize a commercial laundry (not self-service) which satisfies the requirements stated in (1)(a) through (g) above.</p> <p>(3) A health care facility with beds must:</p> <p>(a) keep each resident bed dressed in clean bed linen in good condition;</p> <p>(b) keep a supply of clean bed linen on hand sufficient to change beds often enough to keep them clean, dry, and free from odors;</p> <p>(c) supply each resident at all times with clean towels and washcloths;</p> <p>(d) provide each resident bed with a moisture-proof mattress or a moisture-proof mattress cover and mattress pad;</p> <p>(e) provide each resident with enough blankets to maintain warmth while sleeping.</p>	<p>What is being used for transporting laundry? Are these containers separate for dirty and clean?</p> <p>How are bed linens being dried?</p> <p>How is the clean laundry protected from contamination?</p> <p>Observe laundry staff while working for (e)</p> <p>IF: Name of Laundry service_____</p> <p>Location:_____</p> <p>Conduct on-site survey of service for compliance with (a) through (g).</p> <p>Examine unused facility bed for moisture-proofing & condition of bedding.</p> <p>Examine storage for available supply of bed linen, towel, and blankets.</p> <p>Interview residents/patients and note any complaints of being cold at any time of day while at bed rest.</p>			